PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

					(_,			1	
INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifical	form should be used to correspondence including delow or directed of tions.	or transing the Incrwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBLIC ders and notification pentitying a new of	CATI of n	ON FEE (if requinaintenance fees we pondence address;	red). B vill be r and/or	locks 1 through 5 sho nailed to the current c (b) indicating a separa	ould be completed where correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 22443 7590 06/19/2007 JUN 2.9 2007						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
22443	NA PARAMETER SE		Cor	tificato	of Mailing or Transm	viction				
LAW OFFICE P O BOX 3424 DUBLIN, OH 43	1 Marshard 8	Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.								
07/02/2007 CCHAU2 00000055 10791417						Monica H. Choi			(Depositor's name)	
01 FC:1501 1400.00 OP						Thonica Hollson			(Signature)	
02 FC:8001 3.00 OP 03 FC:9998 1.00 OP						June 27, 2007			(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVENTO		ATTORNEY DOCKET NO		RNEY DOCKET NO.	CONFIRMATION NO.	
10/791,417	10/791,417 03/02/2004			Wan Yen Teoh	03-11			03-11	5407	
FITLE OF INVENTION: CYCLING THROUGH ADDRESSES OF A MEMORY DEVICE WITH MINIMIZED CHARGE GAIN FAILURE										
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE D		PREV. PAID ISSUE FI		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO \$1400		\$0		\$0		\$1400	09/19/2007	
EXAMINER			ART UNIT CLASS-SUBCLA		S					
SAVLA, ARPAN P			2185	711-218000		•				
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Advanced Mi	cro Devices,	Inc.		Sunnyva1	e,	California			1	
lease check the appropr	iate assignee category or	catego	ries (will not be pr	inted on the patent):		Individual 🖾 Co	rporatio	on or other private grou	p entity Government	
Ha. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed.										
	Payment by credit card. Form PTO-2038 is attached.									
□ Publication Fee (No small entity discount permitted) □ Advance Order - # of Copies 1 (One)				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
. Change in Entity Stat	tus (from status indicate	d above) .							
a. Applicant claim	s SMALL ENTITY state	ıs. Sec 3	37 CFR 1.27.				_	TTY status. See 37 CFI		
NOTE: The Issue Fee an nterest as shown by the i	d Publication Fee (if req records of the United Sta	uired) w ites Pate	vill not be accepted ent and Trademark	I from anyone other t Office.	han t	he applicant; a regi	stered a	ttorney or agent; or the	assignee or other party in	
Authorized Signature	Thonja	H	Cho	•		DateJu	ne 2	7, 2007		
Typed or printed name Monica H. Choi			·· · · · · · · · · · · · · · · · · · ·	Registration No. 41,671						
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete										

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.